AMENDMENT TRANSMITTAL LETTER						Docket No. 0152-0734PUS1	
Application No.		Filing Date		Examiner		Art Unit	
10/580,908-Conf. #9354		May 30, 2006		C. C. Chang		1625	
Applicant(s): Aki	o IMAI et al.						
	ESSES FOR P THYLPIPERID			(5,6-DIMETHOXY-1 DE THEREOF	INDANO	N)-2-	
MS AF Commissioner for P.O. Box 1450 Alexandria, VA 22							
Transmitted here	with is an ame	ndment in the	above-identit	ied application.			
The fee has been	n calculated an	d is transmitte	d as shown b	elow.			
		CLAIM	S AS AMEN	DED			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	14	- 20 =	0	x 52.00		0.00	
Independent Claims	2	- 3 =	0	x 220.00		0.00	
Multiple Depend	-	eck if applicabl	e)				
Other fee (please specify): TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						0.00	
[]						0.00	
				Small Entity			
X No additiona	•		nament.				
	ge Deposit Acc copy of this she			n the amount of \$ _		•	
A check in the	ne amount of \$		is enclo	sed.			
Payment by	credit card. Fo	orm PTO-2038	is attached.				
	is hereby auth below. A dup			Deposit Account No enclosed.	o02	-2448	
	ny overpaymer <i>1</i>						
x Gharge	/)		n processing	fees required under 3	7 CFR 1.1	6 and 1.17.	
186	W C			Dated:	ebruary	5, 2010	
John/W. Bailey Attorney Reg. N	lo.: 32,881						
BIRCH, STEWA 8110 Gatehous Suite 100 East P.O. Box 747 Falls Church, V (703) 205-8000	e Road irginia 22040-0		_P				